

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION	BA	10385	
O.I.P.E. CLASSIFIER		8	10-899
FORMALITY REVIEW	TS	71480	10-18-99

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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